

Please type a plus sign (+) inside this box



Approved for use through 10/31/2002. OMB 0651-0716
 U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
 Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	
Filing Date	
First Named Inventor	FIDLER
Group Art Unit	
Examiner Name	
Attorney Docket Number	2508-87662

I hereby appoint:

Practitioners at Customer Number
OR
 Practitioner(s) named below:

27730



Place Customer Number
 Bar Code Label here

Name	Registration Number
Evelyn H. McConstry	35,279

as my/our attorney(s) or agent(s) to prosecute the application identified above, METHOD FOR A COMMERCIAL-FREE, TELEVISIONED GAME SHOW, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

The above-mentioned Customer Number OR

<input type="checkbox"/> Firm or Individual Name	
Address	
Address	
City	State
Country	Zip
Telephone	Fax

I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.7.1 (Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/86)).

SIGNATURE of Applicant or Assignee of Record

Name	WILLIAM J. FIDLER
------	-------------------

Signature	
-----------	--

Date	2/28/02
------	---------

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

* Total of ONE (1) form(s) are submitted.